SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, SEPTEMBER 22ND, 1906.

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Meetings of Branches & Divisions.

[*The proceedings of the Divisions and Branches of the Association relating to Scientific and Clinical Medicine, when reported by the Honorary Secretaries, are published in the body of the* JOURNAL.]

EDINBURGH BRANCH:
SOUTH-EASTERN COUNTIES DIVISION.

THE autumn meeting was held in the house of Dr. Henderson, 9, Church Street, Galashiels, on the afternoon of Thursday, September 13th, at 3.30 p.m., Dr. YOUNG, Chairman, presiding.

Confirmation of Minutes.—The minutes of the annual meeting were read, approved, and signed by the Chairman.

Annual Representative Meeting.—Dr. BLAIR gave his report of the Annual Representative Meeting in the Caxton Hall, London. He held that notwithstanding the increasing expenses of the new administration the Association was financially sound. He explained that the question of the Charter was still under consideration, and would be referred to Divisions in due course. Many other matters of importance were referred to.—Dr. YOUNG proposed a hearty vote of thanks to Dr. Blair as Representative for his elaborate and painstaking report.—Dr. HAMILTON seconded, and the motion was unanimously carried.

Hospital Committee's Report.—Dr. HAMILTON discussed the Hospital Committee's Report. The desire of the Committee was to place no hindrance upon the treatment of the real poor. Cases were mentioned of robbery, pure and simple, on the part of people living in luxury seeking advice, sending servants to hospitals, having operations performed, whilst keeping hunters, horses, and carriages. One case was mentioned of a millionaire who subscribed one guinea annually to the London Hospital Fund, but recovered much more than that sum through board received by servants, whom he always sent to hospital when ill.

Vote of Thanks.—All the members, on the motion of the CHAIRMAN, united in thanking Dr. Henderson for his kind hospitality so generously accorded and so much enjoyed.

Annual Dinner.—It was agreed to hold the annual dinner in October, and the Secretary was instructed to carry out the arrangements.

LANCASHIRE AND CHESHIRE BRANCH:
BLACKBURN DIVISION.

A MEETING of the Blackburn Division was held at the Old Bull Hotel, Blackburn, on Friday, August 31st, Dr. WALLERS in the chair.

Confirmation of Minutes.—The minutes of the last meeting were confirmed.

Hospital Management.—The proposals as to the model principles of hospital management drawn up by a Joint Committee of the British Medical Association and of non-medical representatives of Boards of Management of hospitals were then considered. All the suggestions except No. 2 were approved of. In regard to No. 2 the meeting decided that it was not practicable to dispense with subscribers' recommendations in this district at present. Dr. Bannister promised to report the views of this meeting at the next meeting of the Board of the Blackburn and East Lancashire Infirmary.

OXFORD AND READING BRANCH:
OXFORD DIVISION.

AN extraordinary meeting of this Division was held on Friday, September 14th, at the Radcliffe Infirmary, under the chairmanship of Dr. COLLIER, in order to discuss the advisability of supporting the suggestions of the Hospitals Committee in the matter of hospital reform.

Hospital Reform.—The following resolution, proposed by Dr. COLLIER and seconded by Mr. PARKER, was carried *nem. con.*:

> That the medical men practising in Oxford and the neighbourhood heartily approve the suggested principles of hospital management, and earnestly hope that the Committee of Management of the Radcliffe Infirmary will give them their most serious consideration with a view to their adoption.

It was further resolved that a copy of this resolution should be posted to all members of the Division not present at the meeting, asking for their support.

SYDNEY AND NEW SOUTH WALES BRANCH.

THE regular general meeting of this Branch was held at the Royal Society's Room on Friday, July 27th, Dr. POCKLEY, President, in the chair.

Confirmation of Minutes.—The minutes of the previous meeting were read and confirmed.

New Members.—The PRESIDENT announced the election of Drs. Segol, J. J. Holland, Connolly, and A. G. Cooley.

Paper.—Professor WELSH, on behalf of Dr. Barling and himself, read a paper on the leucocytosis of hydatid disease. Remarks were made by Drs. CHAPMAN and GRIFFITHS. Professor WELSH replied.

Medical Staffs of Hospitals.—Dr. GORDON CRAIG proposed:

> That, in the interests of the profession and public hospitals, junior members of the honorary staff should not oppose

their senior colleagues for a vacancy occurring in the senior staff.

Seconded by Dr. LAWS. Drs. FLASHMAN and CHENHALL, Professor WELSH, Drs. CRAGG, BINNEY, and THOMAS discussed the question. Dr. THOMAS moved, as an amendment:

That the resolution be referred to the Council for consideration and subsequent report to the Branch.

Dr. BINNEY seconded, but eventually the amendment was withdrawn. Dr. FLASHMAN then moved:

That the motion be postponed *sine die*.

Dr. CHAPMAN seconded, but this amendment was also withdrawn. Dr. CRAIG asked permission to withdraw his resolution. Permission was granted, and the resolution withdrawn accordingly.

☞ *To ensure the insertion of notices in this column, they must be received at the Central Offices of the Association not later than the first post on Tuesday.*

Association Notices.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

MEMBERS are reminded that the Library and Writing Rooms of the Association are fitted up for the accommodation of the members in commodious apartments, at the office of the Association, 429, Strand. The rooms are open from 10 a.m. to 5 p.m., except on Saturdays, when they close at 2 p.m. Members can have their letters addressed to them at the office.

BRANCH AND DIVISION MEETINGS TO BE HELD.

ABERDEEN BRANCH.—The annual meeting of this Branch will be held in the Grand Hotel, Aberdeen, on Saturday, October 20th, at 1.15 p.m.—J. F. CHRISTIE and THOMAS FRASER, Honorary Secretaries.

BIRMINGHAM BRANCH: COVENTRY DIVISION.—The annual dinner of this Division will be held at the Masonic Buildings, Little Park Street, Coventry, on Wednesday, October 3rd, at 7.30 p.m. (for 7.45). The Chairman of the Council of the Association (Dr. Langley Browne) and the President of the Branch (Dr. Otho Wyer) have accepted invitations to be present. It is open to members to introduce either medical men or dentists as guests. Tickets (including wine), 12s. 6d. each. Members should communicate with the undersigned their intention to be present or to introduce guests on or before September 27th. Members willing to read papers, show specimens or cases, or open discussions during the coming session are invited to communicate with E. H. SNELL, Honorary Secretary.

DORSET AND WEST HANTS BRANCH.—The autumn meeting will be held in Sherborne on Wednesday, October 24th. Members having papers to read, cases to exhibit, or specimens to show are requested to communicate with the Honorary Secretary before October 12th.—JAMES DAVISON, Honorary Secretary, "Streateplace," Bath Road, Bournemouth.

METROPOLITAN COUNTIES BRANCH.—A meeting of Council will be held on Tuesday, September 25th, at 5 p.m., at the Library of the British Medical Association, 429, Strand, W.C.—D'ARCY POWER, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: WANDSWORTH DIVISION.—An ordinary meeting will be held on Thursday, September 27th, at the Wandsworth Town Hall at 8.45 p.m. Tea and coffee provided. Agenda: (1) Minutes; (2) correspondence; (3) questions; (4) consideration of the Wandsworth circular respecting the General Medical Council election in November next, with subsequent selection of three of the candidates; (5) Dr. L. S. McManus will report on the Representative Meeting in July last, when various resolutions will be moved; (6) other business. It is hoped to organize a small smoking concert for this meeting. Every medical practitioner resident in the area will be invited to attend.—E. ROWLAND FOTHERGILL, M.B., Honorary Secretary, Southfields, S.W.

SHROPSHIRE AND MID-WALES BRANCH.—The next meeting will be held at the Salop Infirmary, Shrewsbury, on October 2nd, at 3 p.m. The President of the Branch (Dr. Alan Rigden) will read a paper on an Analysis of 73 Cases of Puerperal Insanity. Dr. Wheatley, M.O.H. for the County of Salop, will open a discussion on the Desirability of making Phthisis a Notifiable Disease. The annual dinner will be held in the Music Hall in the evening.—C. G. RUSS WOOD, Honorary Secretary.

SOUTH-EASTERN BRANCH: CANTERBURY AND FAVERSHAM DIVISION.—The next meeting of this Division, to which all medical practitioners residing in the South-Eastern Branch are invited, will be held at Dr. Hayward's house, Whitstable, on Thursday, October 4th, at 3 p.m. Agenda: (1) Minutes of previous meeting; (2) time, place, and chairman of next meeting; (3) Dr. Whitehead Reid will open a discussion on Hospital Reform. Drs. Alexander and Fenhoulet will also speak as regards the arrangements at the Faversham and Herne Bay hospitals respectively; (4) any other business.—A. R. HENCHLEY, Honorary Secretary, Canterbury.

SOUTH-EASTERN BRANCH: DOVER DIVISION.—The quarterly meeting of this Division will be held at the Grand Hotel, Dover, on Thursday, September 27th, at 8.30 p.m. Agenda: (1) Reading of minutes; (2) reading of letter from town clerk *re* local hospitals; (3) memorandum from Association *re* hospital management; (4) other business, if any.—F. A. OSBORN, Honorary Secretary.

SOUTHERN BRANCH.—The Council will shortly proceed to nominate two members to be submitted to the electors as Representatives of the Branch on the General Council of the Association. Candidates should send their names to me, each nominated by three electors, on or before October 5th.—H. J. MANNING, Honorary Secretary, Laverstock House, Salisbury.

A SIDELIGHT ON MEDICAL EDUCATION.

SOME three years ago we began to publish analyses of the results of the examinations for admission to the Public Services, the Navy, the Indian Medical Services, and the Royal Army Medical Corps. These examinations present more than one point of interest, since apart from the fact that they reveal the extent to which these services attract young medical men, as proved by the number of candidates to vacancies, they are the only competitive medical examinations which exist. If, therefore, returns in respect of them covering a sufficient number of examinations are studied, they cannot fail to throw a light, obtainable in no other way, on at least two points. The examinations are both qualifying and competitive; the results, therefore, afford at least a clue to the question of how far the standards set by the authorities of these services correspond to the standards of the various licensing bodies as a whole, and as to how the different licensing bodies compare with one another when tested, through their licenses, by a common standard totally independent of all or any of them. Undoubtedly, therefore, these analyses are useful, so we have continued to have them prepared, and now publish a series of tables identical in arrangement with their predecessors but differing from them in that they cover not a part but the whole of the examinations which have been held since the spring of 1902.

THE EXTENT OF COMPETITION.

Of the eight tables given the first shows the extent of the competition, and it will be noted that altogether 693 men contested for 434 commissions, or an average of 5 competitors to every 3.1 vacancies. This seems to be fairly satisfactory, especially when it is remembered that the competing candidates are to a certain extent selected men, others who have sent in their names being refused permission to compete from considerations into which professional knowledge does not enter. Between the three services the competition, as might be expected, is keenest for the Indian Medical Service, and least keen for the Navy, the Royal Army Medical Service occupying the middle place. The differences, moreover, are not inconsiderable, there being more than two candidates for every vacancy in the Indian Medical Service against ten for seven in the navy.

From Table II it will be seen that the English candidates greatly preponderate, though to a less extent than was the case a year or so ago. Of the total number nearly 43 per cent. have come from English colleges and universities; while Ireland, which has recently much increased its entry, comes next with close on 30 per cent., not overtopping Scotland, however, to any extent. The small balance is made up of Colonial and Indian qualifications, or of those who, as holding qualifications derived from more than one country, are classified as "Mixed."

From Table III will be gathered the manner in which the commissions were finally awarded; it would appear that rather more than half the junior naval and military officers of to-day must be from English schools, the remainder being Irish and Scotch in nearly equal number.

RESULTS OF EXAMINATIONS.

The following tables represent an analysis of all examinations for the Services since June, 1902—namely, four for the Indian Medical Service, four for the Royal Navy, and eight for the Royal Army Medical Corps:

TABLE I.

Showing the Extent of the Competition for each Service.

Services.	No. of Candidates.	No. of Vacancies.	Proportion of Candidates to Vacancies.
Royal Navy Medical Service.	109	79	5 to 3 6
Royal Army Medical Corps...	410	2[illegible]1	5 to 3 3
Indian Medical Service ...	174	84	5 to 2 4
Total or average ...	693	434	5 to 3.1

TABLE II.

Showing whence the Candidates received their Qualifications.

Licensing Body.	Number of Candidates.	Proportion of Entire Number.
English Colleges and Universities ..	296	42.7 per cent.
Scottish ,, ,, ..	181	26 1 ,,
Irish ,, ,, ..	205	29.5 ,,
Colonial ,, ,, ..	6	0 8 ,,
Mixed	5	0.7 ,,
Total or average	693	19.9 per cent.

TABLE III.

Showing the Proportion of Commissions Gained by the Candidates of each Country.

Country.	Number of Commissions Won.	Proportion of all Commissions Offered.
England	228	52.5 per cent.
Scotland	97	22.3 ,,
Ireland	104	23.9 ,,
Colonies	3	0.6 ,,
Mixed	2	0 4 ,,
	434	19 9 per cent.

TABLE IV.

Showing the Relative Success of the Candidates of each Country in Proportion to their Respective Numbers.

Country.	Number of Candidates.	Number who Gained Commissions.	Proportion of Success to Candidates.
England	296	228	77.0 per cent.
Scotland	181	97	53 5 ,,
Ireland	205	104	50.7 ,,
Colonies	6	3	50 0 ,,
Mixed	5	2	40.0 ,,
Total or average...	693	434	62.6 per cent.

TABLE V.

Showing the Percentage of Candidates who Passed the Qualifying Standard, including those who Gained Commissions.

Countries.	Number who Entered.	Number who Passed the Standard.	Proportion to the Total.
English candidates...	296	278	93 9 per cent.
Scottish ,, ...	181	135	74.5 ,,
Irish ,, ...	205	160	78.0 ,,
Colonial ,, ...	6	5	83 0 ,,
Mixed ,, ...	5	4	80.0 ,,
Total or average ...	693	582	83.9 per cent.

TABLE VI.

Showing the Proportion of those who Failed Totally among the Candidates of Each Country.

Country.	Number of Candidates.	Number Rejected.	Proportion of Total Failures.
English candidates...	296	18	6.0 per cent.
Scottish ,, ...	181	46	25.4 ,,
Irish ,, ...	205	45	21.9 ,,
Colonial ,, ...	6	1	16 6 ,,
Mixed ,, ...	5	1	20 0 ,,
Total or average ...	693	111	16 0 per cent.

TABLE VII.

Showing Details of the Performance of each Class of Candidate.

Qualifications.	Number of Candidates.	Commissions Gained.	Qualified but Unsuccessful.	Rejected.	Percentage Rejected.
English Conjoint Board alone	209	163	38	8	3 8
,, ,, and Oxford degree	3	3	0	0	—
,, ,, and Cambridge ,,	5	3	2	0	—
,, ,, and London ,,	19	16	2	1	5 2
,, ,, and Durham ,,	2	2	0	0	—
,, ,, and Manchester ,,	1	1	0	0	—
,, ,, and L.S.A. ,,	1	1	0	0	—
English Apothecaries' Society alone ..	14	10	1	3	21.4
,, ,, ,, and London degree	1	1	0	0	—
London degree alone	5	4	1	0	—
,, ,, and Manchester ..	1	1	0	0	—
Cambridge degree alone	4	3	1	0	—
Durham ,, ...	17	12	1	4	23 5
Birmingham ,, ...	2	1	1	0	—
Manchester ,, ...	12	7	3	2	16 6
Scottish Conjoint Board alone	55	21	10	24	43 6
,, ,, ,, and Edinburgh degree	2	1	0	1	—
Aberdeen degree alone	20	14	4	2	10 0
Edinburgh ,, ...	88	49	21	18	20 4
Glasgow ,, ...	16	12	3	1	6 1
Irish Conjoint Board alone	89	33	28	28	31.4
Dublin University alone	73	43	19	11	15 0
Royal University of Ireland	43	28	9	6	13 9
Colonial universities	6	3	2	1	16 6
Mixed	5	2	2	1	20.0
Total or average	693	434	148	111	16.0

TABLE VIII.

Percentage Comparison of the Work of certain Classes of Candidates.

Qualifications.	Number of Candidates.	Gained Commissions.	Qualified but unsuccessful.	Total Qualified.	Number rejected.	Percentage of Winners.	Percentage qualified.	Percentage rejected.	Order.
English Conjoint diploma alone	209	163	38	201	8	77 9	96.1	3 8	1
English diplomas and English degree	45	36	5	41	4	80.0	91 1	8 8	2
English degrees alone	41	28	7	35	6	68.2	85 3	14.6	3
Irish degrees alone	116	71	28	99	17	61 2	85 3	14.6	4
Scottish degrees alone	124	75	28	103	21	60.4	83.0	16.4	5
Irish Conjoint diploma alone	89	33	28	61	28	37.0	68 5	31.4	6
Scottish Conjoint diploma alone	55	21	10	31	24	38 1	56.3	43.6	7
Other classes together	—	—	—	—	—	—	—	—	—
Total or average	693	434	148	582	111	62.6	83.9	16.0	—

SUCCESS AND FAILURE.

The next three tables (IV, V, and VI) fall into a different category; they show the performances of the candidates of each country in respect of the following points: (1) The success of man against man as revealed by the number of commissions carried off by what may be called the teams of each country in proportion to their respective numbers; (2) the extent to which the candidates, although unsuccessful in competition, yet acquitted themselves creditably by passing the qualifying standard; (3) the proportion of men of each country who failed totally, by not obtaining the lowest qualifying number of marks and thus being rejected altogether.

It will be observed that of what we have called the three teams, that of England comes out markedly the best, winning proportionately over 20 per cent. more commissions, and including about a quarter as many total failures among its men. As regards Scotland and Ireland, on the other hand, there is practically nothing to choose between the two teams in point of success in competition, but the Irish team figures better as regards the proportion of men who reached the qualifying standard.

DIFFERENT QUALIFYING BODIES.

Perhaps, however, the greatest and most living interest attaches to the two final tables, numbered (VII) and (VIII), and undoubtedly the former of these should afford much food for reflection to some of the bodies which figure in it. Besides being able to gather from it a pretty shrewd notion as to how those who hold their qualifications fare when they compete in a professional examination with representatives of other similar bodies, they can see the proportion in which they fail to reach the qualifying standard. Naturally all competitors cannot win commissions, but it is open to all to pass the qualifying standard, so it is somewhat remarkable that when the results obtained by various bodies, all of whom have sent up a fairly large number of candidates, are examined, the differences revealed should be so great.

The final table calls, perhaps, for some little explanation. In this the various degrees and diplomas which have figured at the examinations are thrown into certain natural classes, and the latter placed in the order of their success. The latter is judged not by the proportional number of commissions won, but by the height of the percentage of men who passed the qualifying standard (including those who gained commissions), and by the consequent lowness of the percentage of total failures. It will be observed, however, that except in two quite minor instances, the result or order of merit would have been the same if the percentage of commissions won had been taken as the test.

The most striking point about the return is the position occupied by candidates who held nothing but the diploma of the English Conjoint Board, for this class is an easy first with the highest percentage of men who passed the qualifying standard, and the lowest percentage of men rejected. The curious point is that they come out better than either those who held English degrees alone or those who held English degrees in addition to English College or Hall diplomas. Explanations of the former circumstance, perhaps, present themselves, but how the latter comes about is more difficult to understand.

As regards the University degree classes, it will be seen that the performance of the English and Irish respectively precisely correspond as regards the percentages qualified and rejected, but that the English degree team comes to the front in respect of the percentage of winners, and that Scotland is not far behind either. As regards rejections in all three classes of University candidates it will be noted on reference back to the preceding table that Durham and Manchester are responsible for the English rejections, while in respect of the Scottish failures Edinburgh was somewhat less successful than her sister universities, Glasgow and Aberdeen. In regard to Ireland there is some difference in favour of the Royal University both in point of commissions won and of the proportion of candidates qualified.

When we come to the Irish and Scottish Conjoint classes, the differences as compared with those which precede them are marked, the percentages of winners falling heavily and that of rejections rising notably. As between the two the palm must be given to the Irish class, for though the winning percentage is slightly higher in the case of the Scottish candidates, there is a considerable difference in favour of Ireland in respect of the percentage of men who totally failed and of those who reached the qualifying standard but did not gain appointments.

GENERAL CONCLUSIONS.

The figures supplied by the tables are fairly large; they would not justify any very detailed deductions, but they certainly afford a sound basis for some general conclusions, which each body concerned can best work out for itself. In connexion with previous returns relating to a few examinations only, it has been suggested that the best sidelight would be obtained by taking the examinations for the Indian Medical Service alone, because these are reputed to be the most difficult and they are certainly those in which competition is keenest and in which the number of total failures, or of men who fail to reach the qualifying standard, is highest. From a certain number of trials which have been made, however, it does not appear that any broad conclusions which may justly be founded on the examinations as a whole would be vitiated by taking the Indian Medical Service examinations separately. The one result would simply be to raise the percentage of total failures all round without greatly altering the general position the classes occupy in relation to one another.

THE GENERAL MEDICAL COUNCIL ELECTION.

DR. JOHN CHARLES SMITH (Northwood, Middlesex) writes: In the SUPPLEMENT of the BRITISH MEDICAL JOURNAL for September 15th I notice a circular signed by the Chairman of the Wandsworth Division. This has been, or is to be, sent to all the Divisions of the British Medical Association. It purports to institute an organized attempt to return three medical practitioners who would prove acceptable to the majority of the profession as their Representatives on the General Medical Council. The utterly unwarrantable assumption underlying this statement is that without the assistance of the Wandsworth Division the profession will choose three practitioners who are not acceptable to it. But, Sir, my main objection to this circular lies in the fact that it is a gross act of insubordination. The Representative Meeting which met in July last, consisting as it did of nominees of all the Divisions, unanimously agreed that NO candidates were to be recommended by the Association, and here we have one Division trying to induce the others to rebel against and defy this resolution. The whole proceeding is stultification of our new Constitution and an attempt to establish a "caucus" in its worst form. Three strong candidates are now before us—namely, Messrs. George Brown and George Jackson, the present Representatives, and Joseph Smith of Chiswick, President of the Society of Members of the Royal College of Surgeons, an ardent reformer for twenty years, and who contested the seat on the Council against Sir Victor Horsley, and polled between 3,000 and 4,000 votes on that occasion. I hope the three named will be returned with large majorities.

Naval and Military Appointments.

ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: EDMUND CORCORAN, Fleet Surgeon, and THOMAS F. O'KEEFE, M.B., Surgeon, to the *President*, additional, for annual survey of medical stores at Deptford Yard, October 1st; PERCY V. JACKSON, Fleet Surgeon, to the *Majestic*, on recommissioning, October 2nd; HENRY M. BRAITHWAITE, M.B., Surgeon, to the *Britannia*, on completing, October 2nd; EDWARD A. G. WILKINSON, Surgeon to the *Victory*, additional, to be lent to the Royal Naval College, Osborne, October 2nd.

ROYAL ARMY MEDICAL CORPS.

THE undermentioned gentlemen to be Lieutenants on probation, dated July 30th, 1906:—G. H. STEVENSON, M.B., J. H. SPENCER, M.B., W. H. FORSYTH, M.B., A. H. HESLOP, M.B., A. C. AMY, M.B., W. MITCHELL, M.B., J. A. B. SIM, M.B., E. J. ELLIOT, M.B., F. B. LATHBURY, E. GIBBON, M.B., C. SCAIFE, M.D., R. W. D. LESLIE, E. D. CADDELL, M.B., M. J. LOCHRIN, D. M. CORBETT, M.B., B. JOHNSON, W. E. C. LUNN, M.B., J. R. FOSTER, A. H. JACOB, A. M. BENETT, F. L. BRADISH, G. P. A. BRACKEN, O. C. P. COOKE, W. W. BOYCE, C. KELLY, M.B., C. H. DENYER, W. J. E. BELL, M.B., D. COUTTS, M.B., W. F. M. LOUGHNAN, D. T. MACCARTHY, M.B., H. L. HOWELL, C. W. BOWLE, J. J. O'KEEFFE, M.B., J. A. BENNETT, M.B., T. W. BROWNE, W. I. THOMPSON, M.B., R. C. GALGEY, E. J. KAVANAGH, M.B., and E. C. PHELAN, M.B.

The undermentioned Lieutenants, appointed such January 31st, 1903, are promoted to be Captains, July 31st, 1906: J. G. BELL, M.B., M. G. WINDER, F. W. W. DAWSON, M.B., J. E. H. GATT, M.D., R. M. RANKING, M.B., T. S. COATES, M.B., A. E. B. WOOD, M.B., J. C. G. CARMICHAEL, M.B., R. H. BRIDGES, J. A. W. WEBSTER, F. C. LAMBERT, J. B. MELDON, R. C. WILMOT, C. W. HOLDEN, H. B. KELLY, M.B., E. M. PENNEFATHER, G. H. J. BROWN, M.B., B. H. V. DUNBAR, M.D., D. AHERN, D. G. CARMICHAEL, M.B., J. M. M. CRAWFORD, C. BRAMHALL, T. E. HARTY, H. H. SWANZY, J. H. DUGUID, M.B., H. T. STACK, M.B., B. G. PATCH, and G. W. G. HUGHES. The war records of those having any are as follow: Captain Bell—South African war, 1900-2 as a Civil Surgeon, including operations in Orange River Colony, Cape Colony, and the Transvaal (King's medal with two clasps). Captains Winder, Lawson, and Wood—South African war, 1901-2, as Civil Surgeons. Captains Holden and Pennefather—South African war, 1901-2, as Civil Surgeons (Queen's medal with three clasps).

The undermentioned Lieutenants are seconded under the provisions of Article 349, Royal Warrant, March 19th, 1906: B. JOHNSON and W. E. C. LUNN, M.B., July 30th; J. H. SPENCER, M.B., July 31st.

Lieutenant-Colonel R. W. FORD, D.S.O., from the Seconded List, to be Lieutenant-Colonel, August 17th. As already announced in the BRITISH MEDICAL JOURNAL, Lieutenant-Colonel Ford from the same date has vacated the appointment of Deputy-Surgeon at Chelsea Hospital.

Lieutenant-Colonel R. J. C. COTTELL is seconded whilst holding the appointment of Deputy-Surgeon, Royal Hospital, Chelsea, August 17th.

Captain T. J. CREAN, V.C., retires, receiving a gratuity, September 8th. He joined the department as Captain, September 3rd, 1902. He served in the South African war in 1899-1902 with the Imperial Light Horse, and took part in the defence of Ladysmith, in the actions at Elandslaagte, Rietfontein, and Lombard's Kop, the relief of Mafeking, and in operations in the Transvaal and Orange River Colony; he was twice wounded, and has been granted the Queen's medal with five clasps, the King's medal with two clasps, and the Victoria Cross.

Colonel J. F. WILLIAMSON, M.B., C.B., C.M.G., at present serving at Mhow, has been appointed by the Viceroy of India as Honorary Surgeon on his staff, vice Colonel Sanderson.

Lieutenant-Colonel R. F. O'BRIEN retires on retired pay, September 12th. He entered the service as Surgeon, July 30th, 1881; became Surgeon-Major July 30th, 1893, and Lieutenant-Colonel July 30th, 1901. He served with the Burmese Expedition in 1885-6, receiving a medal with clasp, and in 1901-2 in operations in the Orange River Colony during the war in South Africa.

Lieutenant-Colonel A. V. LANE retires on retired pay, September 15th. His commissions are thus dated: Surgeon, July 30th, 1881; Surgeon-Major, July 30th, 1893; Lieutenant-Colonel, July 30th, 1901. He served in the Egyptian war in 1882-4, receiving a medal and the Khedive's bronze star, and in the Soudan campaign in 1884, including the battles of El Teb and Tamai, for which he had two clasps.

Lieutenant J. W. L. SCOTT, from the Seconded List, to be Lieutenant, September 1st. He was appointed on probation, January 30th, 1906.

The name of Lieutenant-Colonel RICHARD H. PENTON, D.S.O., is as now described, and not as stated in the *Gazette* of August 7th.

ARMY MEDICAL RESERVE.

SURGEON-LIEUTENANT J. N. MACMULLAN to be Surgeon-Captain, August 14th.

Surgeon Lieutenant-Colonel J. H. MACLEAN, having resigned his commission in the Volunteers, ceases to belong to the Army Medical Reserve.

INDIAN MEDICAL SERVICE.

LIEUTENANT-COLONEL D. FFRENCH-MULLEN, M.D., Bengal, is appointed to officiate as Principal Medical Officer, Sirhind and Jullundur Brigades.

Lieutenant-Colonel W. A. MAWSON, Bengal Establishment, is permitted to retire from the service from July 14th. He was appointed Assistant Surgeon, March 31st, 1876, and became Surgeon-Lieutenant-Colonel, March 31st, 1896. He was in the Afghan war in 1878-80, being present at the capture of Ali Musjid, the battle of Charasia, and at the operations at and around Kabul in December, 1879 (mentioned in dispatches, medal with three clasps); in the campaign on the North-West Frontier of India in 1897-8 with the Tochi Force (medal with clasp); and with the Waziristan expedition in 1901-2 (mentioned in dispatches, clasp).

The retirement from the service of Lieutenant-Colonel L. A. WADDELL, C.B., C.I.E., M.B., Bengal Establishment, is gazetted; but we understand that since the announcement appeared Lieutenant-Colonel Waddell has been permitted to cancel his application to retire.

ROYAL GARRISON ARTILLERY (VOLUNTEERS).

SURGEON-CAPTAIN A. B. LYON, M.D., 2nd Middlesex, to be Surgeon-Major, August 20th.

Surgeon-Lieutenant-Colonel (Honorary Captain in the Army) A. THORNE, M.B., 2nd Middlesex, is granted the honorary rank of Surgeon-Colonel, August 27th.

VOLUNTEER OFFICERS' DECORATION.

THE Volunteer Officers' Decoration has been conferred upon the following officers:—Surgeon-Major and Honorary Lieutenant-Colonel DUNCAN STEWART, 1st Volunteer Battalion the Northumberland Fusiliers; Surgeon-Major J. W. T. GILBERT, 1st Cinque Ports Royal Garrison Artillery (Volunteers).

VOLUNTEER RIFLES.

SURGEON-CAPTAIN J. M. HARPER, 1st Volunteer Battalion the Prince Albert's (Somersetshire Light Infantry), to be Surgeon-Major, August 1st.

Surgeon-Lieutenant-Colonel E. WILLIAMS, 2nd Volunteer Battalion the Royal Welsh Fusiliers, is granted the honorary rank of Surgeon-Colonel, September 15th.

Surgeon-Captain W. M. GABRIEL, 3rd Volunteer Battalion the Duke of Wellington's (West Riding Regiment), to be Surgeon-Major, September 15th.

Surgeon-Captain J. HAMILTON, 2nd Volunteer Battalion the Queen's Own (Royal West Kent Regiment), resigns his commission, August 28th. He is appointed Captain in the same regiment from the same date.

Surgeon-Lieutenant-Colonel T. PHILIP, M.B., 1st (Renfrewshire) Volunteer Battalion Princess Louise's (Argyll and Sutherland Highlanders), is borne as supernumerary whilst holding the appointment of Brigade-Surgeon-Lieutenant-Colonel, Senior Medical Officer, Clyde Volunteer Infantry Brigade, August 20th.

ROYAL ARMY MEDICAL CORPS (VOLUNTEERS).—BEARER COMPANIES.

CAPTAIN W. THOMPSON, Gloucester and Somerset, resigns his commission, September 15th.

Lieutenant M. S. W. GUNNING, Leicester and Lincoln, to be Captain, September 15th.

CHANGES OF STATIONS.

The following changes of stations amongst the officers of the Royal Army Medical Corps have been officially reported to have taken place during August, 1906:

	FROM	TO
Colonel O. Todd, M.B.	Egypt	Poona.
Lieut.-Col. H. G. Hathaway	Bombay	,,
,, R. W. Ford, D.S.O.	Chelsea Hosp.	London Dist.
,, G. Coutts, M.B.	Salisbury	Colchester.
,, J. M. Reid, M.D.	,,	Hong Kong.
,, G. G. Adams	Maryhill	Salisbury.
,, R. J. C. Cottell	Woolwich	Chelsea Hosp.
Major G. A. T. Bray	Ranikhet	Calcutta.
,, E. McK. Williams	Dover	Brighton.
,, R. C. Lewis	Bareilly	Meerut.
Captain N. H. Ross, M.B.	Eastern Comd.	Colchester.
,, P. H. Collingwood	York	Hong Kong.
,, M. H. G. Fell	South'n Comd.	Rhayader.
,, G. M. Goldsmith, M.B.	York	Lichfield.
,, L. Humphry	Eastern Comd.	Shorncliffe.
,, J. J. W. Prescott, D.S.O.	York	Leeds.
,, H. E. M. Douglas, V.C., D.S.O.	Simla	Meerut.
,, J. I. W. Morris	Edinburgh	Perth.
,, B. F. Wingate	Canterbury	Kingston.
,, A. E. Hamerton, D.S.O.	Ferozepore	London Dist.
,, J. M. Cuthbert, M.B.	Stirling	Edinburgh.
,, F. H. Hardy	Colchester	Mill Hill.
,, W. L. Bennett, M.B.	Edinburgh	Aberdeen.
,, W. B. Fry	Dover	Canterbury.
,, E. F. Q. L'Estrange	West'rn Comd.	Manchester.
,, H. G. Pinches	Lucknow	Allahabad.
,, R. M'K. Skinner	Strensall	West Africa.
,, F. E. Rowan-Robinson, M.B.	Bombay	Colaba.
,, G. A. K. H. Reed	Jhansi	Nowgong.
Lieutenant A. E. B. Wood, M.B.	Allahabad	Fyzabad.
,, J. A. W. Webster	Secunderabad.	Poona.
,, J. B. Meldon	Malapuram	Bangalore.
,, A. C. Osburn	Agra	Calcutta.
,, J. Fairbairn, M.B.	Khandalla	Colaba.
,, J. H. Douglass, M.D.	Madras	Bangalore.
,, R. R. Lewis	Ramandroog	Bellary.
,, R. B. Hole, M.B.	Khandalla	Colaba.
,, E. J. H. Luxmoore	Simla	Meerut.
,, G. H. Richard	Calcutta	Barrackpore.
,, G. B. F. Churchill	Lucknow	Cawnpore.
,, T. H. Gibbon, M.D.	Egypt	Crete.
,, W. G. Maydon, M.B.	Lebong	Calcutta.
,, G. E. Ferguson	Aldershot	Devonport.
,, G. H. Rees, M.B.	,,	Portsmouth.
,, R. A. Bryden	Bordon	Tidworth.
,, H. E. Priestley	Aldershot	Preston.
,, A. C. Vidal	Ewshott	Aldershot.
,, A. S. Littlejohns	Woolwich	Ewshott.
,, C. T. Edmunds	Aldershot	Bordon.
,, P. Sampson	,,	,,

Lieutenant-Colonels R. W. Barnes and M. J. Whitty, M.D., retired pay, have been placed in medical charge of troops at Dorchester and Liverpool respectively.

Vital Statistics.

HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 8,350 births and 6,754 deaths were registered during the week ending Saturday, September 8th. The annual rate of mortality in these towns, which had been 17.0, 18.4, and 18.3 per 1,000 in the three preceding weeks, rose again to 22.3 per 1,000 in the week under notice. The rates in the several towns ranged from 8.4 in Hornsey, 10.8 in King's Norton, 12.8 in West Hartlepool, 13.1 in South Shields, 14.3 in Halifax, 14.5 in Barrow-in-Furness, and 14.6 in Bournemouth and in Devonport, to 29.8 in Hull, 30.7 in Croydon, 31.1 in Bury, 31.4 in Hanley and in Stockport, 31.5 in St. Helen's, 32.0 in Merthyr Tydfil, 32.8 in Coventry, and 33.8 in Grimsby. In London the rate of mortality was 20.9 per 1,000, while it averaged 22.8 per 1,000 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 8.5 per 1,000 in the seventy-six towns; in London this death-rate was equal to 6.4 per 1,000, while among the seventy-five large provincial towns the rates ranged upwards to 13.0 in Liverpool, 14.6 in Sheffield, 15.8 in Grimsby, 16.1 in Preston, 16.5 in Aston Manor, 16.7 in Stockport, 17.4 in Bootle, 18.1 in Hanley, and 23.2 in Coventry. Measles caused a death-rate of 1.2 in West Ham, in East Ham, and in Wigan, 1.6 in Huddersfield, 1.8 in Bury, 2.1 in Stockport, and 2.6 in Rotherham; diphtheria of 1.3 in Aston Manor and 1.6 in Smethwick; whooping-cough of 1.6 in Swansea and 2.1 in Middlesbrough; "fever" of 1.2 in Hull and 1.3 in Aston Manor; and diarrhoea of 12.3 in Liverpool and in Rhondda, 13.9 in Aston Manor and in Sheffield, 14.7 in Stockport, 15.0 in Bootle, 15.8 in Grimsby, 16.1 in Preston, 17.3 in Hanley, and 22.5 in Coventry. The mortality from scarlet fever showed no marked excess in any of the large towns. One fatal case of small-pox was registered in Devonport, but none in any other of the seventy-six towns; and no small-pox patients were under treatment during the week in any of the Metropolitan Asylums Hospitals. The number of scarlet fever cases remaining in these hospitals and the London Fever Hospital at the end of the week was 3,067, against 3,046, 3,078, and 3,042 at the end of the three preceding weeks; 415 new cases were admitted during the week, against 317, 350, and 317 in the three preceding weeks.

In seventy-six of the largest English towns, including London, 8,349 births and 6,398 deaths were registered during the week ending Saturday last, September 15th. The annual rate of mortality in these towns, which had been 18.4, 18.3, and 22.3 per 1,000 in the three preceding weeks, declined again to 21.1 per 1,000 last week. The rates in the several towns ranged from 4.8 in Hornsey, 8.6 in Halifax, 9.3 in Leyton, 11.0 in Plymouth, 13.6 in King's Norton, 13.9 in Derby, and 14.9 in Willesden, in East Ham, and in Stockton-on-Tees, to 32.6 in Gateshead, 32.7 in Great Yarmouth, 33.7 in Tynemouth, 34.9 in Preston, 35.4,

in Hanley and in Warrington, 36.0 in Burnley, 36.1 in Grimsby, and 39 6 in Merthyr Tydfil. In London the rate of mortality was 17.6 per 1,000, while it averaged 22.6 per 1,000 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 8.3 per 1,000 in the seventy-six large towns; in London this death-rate was equal to 5.5 per 1.000, while among the seventy-five other large towns the rates ranged upwards to 15.0 in Norwich, 15.2 in Burnley and in Gateshead, 15.5 in Rhondda, 16.4 in Coventry and in Tynemouth, 17.0 in Preston, 20 3 in Grimsby and in Warrington, and 20 4 in Hanley. Measles caused a death-rate of 1.5 in Oldham and 1 6 in Stockport; scarlet fever of 1.2 in Rochdale; diphtheria of 1.2 in Rhondda and 2 6 in Reading; whooping-cough of 1.3 in Birkenhead, 1.4 in Merthyr Tydfil, and 2 2 in Swansea; "fever" of 1.0 in Middlesbrough and 2.3 in Grimsby; and diarrhoea of 13.5 in Wolverhampton and in West Hartlepool, 13.7 in Norwich and in Smethwick, 13 9 in Rhondda, 14.2 in Burnley, 14.8 in Gateshead, 15.4 in Tynemouth, 15.7 in Preston, 18 0 in Grimsby, 19.6 in Warrington, and 20.4 in Hanley. One death from small-pox was registered in Devonport, but none in any other of the seventy-six towns, and no small-pox patients were under treatment last week in the Metropolitan Asylums Hospitals. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had been 3,078, 3,042, and 3,067 at the end of the three preceding weeks, had further risen to 3,075 at the end of last week; 440 new cases were admitted during the week, against 350, 317, and 415 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, September 8th, 904 births and 533 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 14.4, 13.8, and 14 2 per 1,000 in the three preceding weeks, further rose to 15.6 per 1,000, but was 6.7 per 1,000 below the mean rate during the same period in the seventy-six large English towns. Among these Scotch towns the rates ranged from 9.0 in Paisley and 12.6 in Leith to 17.1 in Dundee and in Aberdeen, and 19.2 in Greenock. The death-rate from the principal infectious diseases averaged 2 5 per 1,000, the highest rates being recorded in Dundee and Greenock. The 255 deaths registered in Glasgow included 2 which were referred to measles, 3 to scarlet fever, 5 to whooping-cough, 4 to "fever," 31 to diarrhoea, and 3 to cerebro-spinal meningitis. Two deaths from whooping-cough and 9 from diarrhoea occurred in Edinburgh. Ten deaths from diarrhoea were recorded in Dundee, 6 in Greenock, 4 in Aberdeen, and 2 in Leith.

During the week ending Saturday last, September 15th, 835 births and 576 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 13.8, 14.2, and 15.6 per 1,000 in the three preceding weeks, further rose last week to 16.8 per 1,000, but was 3 3 per 1,000 below the rate during the same period in the seventy-six large English towns. Among these Scotch towns the death-rates ranged from 12.8 in Aberdeen and 13.8 in Edinburgh to 17.9 in Glasgow and 23.1 in Dundee. The death-rate from the principal infectious diseases averaged 4.0 per 1,000 in these towns, the highest rates being recorded in Glasgow, Paisley, and Greenock. The 287 deaths registered in Glasgow included two which were referred to measles, 4 to scarlet fever, 6 to whooping-cough, 3 to "fever," and 67 to diarrhoea. Six fatal cases of diarrhoea were recorded in Edinburgh; 3 of whooping-cough and 10 of diarrhoea in Dundee; 2 of diarrhoea in Aberdeen, 8 in Paisley, and 5 in Leith; and 2 of whooping-cough and 5 of diarrhoea in Greenock. There were also 2 fatal cases of cerebro-spinal meningitis in Glasgow and 1 in Paisley.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, September 1st, 514 births and 348 deaths were registered in six of the principal Irish towns, as against 519 births and 355 deaths in the preceding period. The annual death-rate in these towns, which had been 16.4, 15.9, and 17.8 per 1,000 in the three preceding weeks, fell to 16 8 per 1,000 in the week under notice, this figure being 1 5 per 1,000 lower than the mean annual rate in the seventy-six English towns for the corresponding period. The figures ranged from 9.7 in Waterford and 15.0 in Limerick to 19.1 in Belfast and 21.9 in Dublin. The zymotic death-rate during the same period and in the same six Irish towns averaged 2.0 per 1,000, or 0 2 per 1,000 higher than during the preceding period, the highest figure —4.8—being recorded in Dublin, while Limerick and Waterford registered no deaths under this heading at all. In Belfast there were 7 deaths from whooping-cough.

During the week ending Saturday, September 8th, 611 births and 403 deaths were registered in six of the principal Irish towns as against 514 births and 348 deaths in the preceding period. The annual death-rate in these towns, which had been 15.9, 17.8, and 16 8 per 1,000 in the three preceding weeks, rose to 22.3 per 1,000 in the week under notice, this figure being identical with the mean annual rate in the seventy-six English towns for the corresponding period. The figures ranged from 19.8 in Londonderry and 20.5 in Limerick to 24 1 in Dublin and 25.3 in Waterford. The zymotic death-rate during the same period and in the same six Irish towns averaged 5.3 per 1,000, or 3.3 per 1,000 higher than during the preceding period, the highest figure—7.4—being recorded in Londonderry. The principal contributions to the general high rate seem to have been whooping-cough and diarrhoea.

During the week ending Saturday, September 15th, 525 births and 417 deaths were registered in six of the principal Irish towns, as against 611 births and 403 deaths in the preceding period. The annual death-rate in these towns, which had been 17.8, 16.8 and 22.3 per 1,000 in the three preceding weeks, fell to 19.4 per 1,000 in the week under notice, this figure being 1.7 per 1,000 lower than the mean annual rate for the seventy-six English towns for the corresponding period. The figures ranged from 11.7 in Waterford and 17 8 in Cork and Limerick to 20.2 in Belfast and 29.4 in Dublin. The zymotic death-rate during the same period, and in the same six Irish towns, averaged 4.4 per 1,000, or 0 9 per 1 000 lower than during the preceding period, the highest figure—7 4—being recorded in Londonderry, while no deaths under this heading were recorded in Waterford.

BRITISH MEDICAL ASSOCIATION LIBRARY.

BOOKS NEEDED TO COMPLETE SERIES:

The Librarian will be glad to receive any of the following volumes, which are needed to complete series in the Library:

American Climatological Transactions. Vols. 1, 4, 5, 6.
——— Dermatological Association Transactions. Vols 5, 7, 8, 11, and 29.
American Journal of the Medical Sciences. New series, vols. 4, 5, 1842-3; vols. 14, 15, 1847-8; vols. 18-30, 1850; vol. 33, 1857; vol. 46, 1864-5; vol. 59; or any parts of these vols.
——— Journal of Ophthalmology. Vols. 1-9.
——— Laryngological Association. Transactions. Vols. 1-6, 8-9.
——— Medical Association. Transactions, 1-28, 30, 31.
——— Otological Society. Transactions. Vol. 3, part 2, 1883.
——— Public Health Association. Transactions. Any vols.
Analyst. Vols. 1-24.
Archiv für Dermatologie und Syphilis. Prior to 1874, 1892, and 1893.
Annals of Surgery. Vols. 1, 11, 13-16, and 26, 27.
Archives Générales de Médecine. 1831-9 inclusive; 1846-55 inclusive; 1857-64 inclusive; 1871.
——— of Ophthalmology. Vols. 1-3, 6, 7, 14, 15, 16 and 20.
——— of Otology. Vols. 1-7, and 20-22.
——— de Parasitologie. Vols. 1-8.
——— of Pediatrics. Vols. 1-11.
Asylum Journal of Mental Science. Vol. 1, 1854.
Bentley and Trimen. Atlas of Medicinal Plants.
British Journal of Dermatology. Vol. 2, part 3.
British Laryngological and Rhinological Association, 1900-1-2.
Caledonian Medical Journal. Vol. 1 prior to 1894.
Carmichael Essays. Rivington, 1879.
Centralblatt für Augenheilkunde. Hirschberg. All prior to 1891. Index to 1891.
Centralblatt für Bakteriologie. Bound volumes prior to 1899.
——— für medicinischen Wissenschaften. Vols. 1-19.
Congrès Français de Chirurgie. Transactions 1, 2, 3, 6, and 10, and all since 11th.
——— Internat. d'Obstétrique et de Gynécologie. 3. Amsterdam, 1899.
Dermatological Congress. Vienna, 1892.
Dublin Quarterly Journal of the Medical Sciences. Vols. 1, 10, 17, 20, 28, and 35-40.
Edinburgh Obstetrical Society. Transactions. Vol. 5.
Glasgow Medical Journal. 1833-68.
——— Pathological Society. Transactions. Vols. 1 and 2.
Guy's Hospital Gazette. Nos. 1 and 5, 1872.
Hunterian Transactions containing 76th Report.
Indian Medical Gazette. 1866-84.
International Congress of Hygiene. Congresses 1 to 6 and 10 to 12.
——— Medical Congress, 14th sess. Madrid. 15th sess. Lisbon.
——— Ophthalmological Congress. Transactions of 5th, New York, 1876.
Johns Hopkins Hospital Bulletin. Vols. 1-10.
Journal of Laryngology. Vols. 1-9.
Neurologisches Centralblatt. No. 23, 1904.
Ophthalmic Review, January, 1882.
Pediatrics, prior to 1902.
Provincial Medical and Surgical Journal. March to September, 1841.
Recueil d'Ophtalmologie. 1891, January-June; 1892, December.

Vacancies and Appointments.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column, advertisements must be received not later than the first post on Wednesday morning.

VACANCIES.

ABERDEEN ROYAL ASYLUM.—Senior Resident Assistant Physician. Salary, £200 per annum.

AYR DISTRICT ASYLUM.—Senior and Junior Assistant Physicians (male). Salary, £150 and £120 per annum respectively.

BRADFORD ROYAL INFIRMARY.—House-Surgeon. Salary, £100 per annum.

BRIGHTON AND HOVE LYING-IN INSTITUTION AND HOSPITAL FOR WOMEN.—Honorary Anaesthetist.

CAIRO: KASR-EL-AINY HOSPITAL.—Medical Tutor and Registrar. Salary, £400 per annum.

CAIRO: SCHOOL OF MEDICINE.—Professor of Midwifery and Gynaecology. Salary, £400 per annum.

CHORLEY: ROWCLIFFE HOSPITAL.—House Surgeon. Salary, £100 per annum.

DERWENT VALLEY WATER BOARD.—Medical Officer for Workmen's Village.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.—Medical Officer for Casualty Department for six months. Salary at the rate of £100 per annum.

ENNISKILLEN: FERMANAGH COUNTY INFIRMARY.—House-Surgeon. Salary, £52 per annum.

EVELINA HOSPITAL FOR SICK CHILDREN, Southwark, S.E.—Eight Clinical Assistants.

EXETER: ROYAL DEVON AND EXETER HOSPITAL.—Male Assistant House-Physician. Salary, £60 per annum.

HASTINGS AND ST. LEONARDS AND EAST SUSSEX HOSPITAL.—House-Surgeon. Salary, commencing £75 per annum.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—(1) Physician. (2) Resident House-Physicians; honorarium, £25 for six months.

LEICESTER INFIRMARY.—Resident Surgical Dresser. Honorarium, £10 10s. at the end of six months.

MACCLESFIELD: CHESHIRE COUNTY ASYLUM.—Junior Assistant Medical Officer. Salary, £140, rising to £160 per annum.

MACCLESFIELD GENERAL HOSPITAL.—Junior House-Surgeon. Salary, £60 per annum.

MANCHESTER: CHORLTON AND MANCHESTER JOINT ASYLUM COMMITTEE.—Resident Medical Officer for the new Epileptic Colony at Langho. Salary, £150 per annum.

MIDDLESBROUGH: NORTH RIDING INFIRMARY.—House-Surgeon. Salary, £100 per annum.

MOUNT VERNON HOSPITAL FOR CONSUMPTION, Hampstead.—Resident Medical Officer. Honorarium, £50 per annum.

NORTH-EASTERN HOSPITAL FOR CHILDREN, Hackney Road, E.—House-Surgeon for six months. Salary at the rate of £50 per annum.

NORTH-WEST LONDON HOSPITAL, Kentish Town Road.—Second Honorary Anaesthetist.

OLDHAM INFIRMARY.—Senior House-Surgeon. Salary, £100 per annum.

ROBERT BROWNING SETTLEMENT, Walworth, S.E.—Registered medical practitioner (male or female) to take honorary charge of medical work among the poor.

ROYAL LONDON OPHTHALMIC HOSPITAL, City Road, E.—Senior House-Surgeon. Salary, at the rate of £100 per annum.

ST. PANCRAS AND NORTHERN DISPENSARY, Euston Road, N.W.—Resident Medical Officer. Salary, £105 per annum.

SAMARITAN FREE HOSPITAL FOR WOMEN, Marylebone Road, N.W.—Clinical Assistants.

SEAMEN'S HOSPITAL SOCIETY.—Two House Physicians and two House Surgeons at the Dreadnought Hospital, Greenwich. Salary, £50 per annum each. Senior House Surgeon and House Surgeon at the Branch Hospital, Royal Albert Docks. Salary, £75 and £50 per annum respectively.

SHREWSBURY: SALOP INFIRMARY.—(1) House Surgeon, (2) House Physician. Salary at the rate of £100 and £50 per annum respectively.

TOXTETH PARK TOWNSHIP.—Assistant Resident Medical Officer of the Workhouse and Infirmary. Salary, £100 per annum.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—House Surgeon. Salary, £100 per annum.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces vacancies at Newhaven (Sussex), Tullamore (King's County), Lees (Lancashire), Perranporth (Cornwall).

APPOINTMENTS.

ALEXANDER, H. de Maine, M.D.Edin., Medical Superintendent to the Kingseat Asylum, Aberdeen.

BROWNRIDGE, J. L., L.R.C.P.and S.Edin., District Medical Officer of the Hoxne Union.

CANN, F. J. H., M.B.Lond., M.R.C.S.Eng., Certifying Factory Surgeon for the Dawlish District, co. Devon.

CROFTON, W. M., M.B., B.S.R.U.I., District Medical Officer of the Holbeach Union.

DUIGAN, V. J., M.R.C.S., L.R.C.P., Medical Officer of the Workhouse of the Mitford and Launditch Union.

GLENNY, Elliott T., B.S.Lond., House Physician to the Essex and Colchester Hospital, Colchester.

IVENS, Frances, M.B., M.S.Lond., Honorary Medical Officer for the Diseases of Women, Stanley Hospital, Liverpool.

JONES, B. E., L.R.C.P.and S.Edin., Medical Officer of Health, Kirkham Urban District.

McILROY, A. Louise, M.D., L.M.Rotunda, Extra-Dispensary Gynaecologist, Glasgow Royal Infirmary.

MOORE, C. A., M.B., B.S.Lond., M.R.C.S., L.R.C.P., House-Surgeon at the Stanley Hospital, Liverpool.

PARKHURST, R., M.B., C.M.Edin., District Medical Officer of the Newhaven Union.

PARRY, T. Wilfred, M.B., Ch.B.Liv., House Physician, Royal Southern Hospital, Liverpool.

PARSON, Miss A. A., M.B., B.S.Lond., Resident Assistant Medical Officer at the Bradford Union Workhouse.

PHILLIPS, D., M.R.C.S., L.R.C.P.Lond., Medical Officer of Health for the Llandilo Urban District.

ROBERTS, R. J., L.R.C.P.and S.Edin., Certifying Factory Surgeon for the Corris District, cos. Merioneth and Montgomery.

SPITTAL, R. H., M.B., B.S.Aber., District Medical Officer of the Macclesfield Union.

THOMAS, A. H., L.S.A.Lond., Certifying Factory Surgeon for the West Drayton District, co. Middlesex.

WHITE, G. F., M.D., B.Ch.Dub., District Medical Officer of the Orsett Union.

WYLLIE, R. G., M.B., C.M.Aber., District Medical Officer of the Newbury Union.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

BIRTHS.

CRABBE.—On September 15th, at Gravelly Hill, Birmingham, the wife of J. Sandison Crabbe, L.R.C.P.and S., of twin boys.

NICOL.—On September 16th, at Harleston, Norfolk, the wife of Hamish Nicol, M.R.C.S.Eng., L.R.C.P.Lond., of a daughter.

DIARY FOR THE WEEK.

POST-GRADUATE COURSES AND LECTURES.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, 22, Chenies Street, W.C.—The following clinical demonstrations have been arranged for next week at 4 p.m. each day: Monday, Skin; Tuesday, Medical; Wednesday, Surgical; Thursday, Surgical; Friday, Eye.

POST-GRADUATE COLLEGE, West London Hospital, Hammersmith Road, W.—The following are the arrangements for next week: Daily, 2 p.m., Medical and Surgical Clinics; 2.30 p.m., X Rays and Operations. Monday and Thursday, 2.30 p.m., Diseases of the Eye. Tuesday and Friday, 2 p.m., and Wednesday and Saturday, 10 a.m., Diseases of Throat, Nose, and Ear. Tuesday and Friday, 2.30 p.m., Diseases of the Skin. Wednesday, 10 a.m., Diseases of Children.

BOOKS, ETC., RECEIVED.

Kimpton's Public Health Series. Food and Digestion in Health and Disease during Infant, Child, and Adult Life. By M. A. Dutch, M.D. London: H. Kimpton. 1906. 2s. 6d.

Indications for Operation in Disease of the Internal Organs. By Professor H. Schlesinger, M.D. English translation by K. W. Monsarrat, M.B., F.R.C.S.Ed. Bristol: J. Wright and Co. 1906. 9s. 6d.

London: A Guide for the Visitor, Sportsman, and Naturalist. By J. W. Cundall. London: Greening and Co. 1906. 6d.

A Primer of Psychology and Mental Disease. By C. B. Burr, M.D. Third Edition. Philadelphia: F. A. Davis Co. 1906. $1.25.

The Ear and its Diseases. By S. S. Bishop, B.S., M.D., LL.D. Philadelphia: F. A. Davies Co. 1906. $4.

Disease of the Urethra. By P. Clennell Fenwick, M.B.Lond., F.R.C.S.Ed. Melbourne: James Little. 1906.

The Extra-Pharmacopoeia of Martindale and Westcott. Revised by W. Harrison Martindale, Ph.D., F.C.S., and W. Wynn Westcott, M.B.Lond., D.P.H. Twelfth Edition. London: H. K. Lewis. 1906. 10s.

Hand Atlas of Human Anatomy. By Werner Spalteholz. Edited and translated from the fourth German edition by Lewellys F. Barker. In three volumes. Second Edition. London: J. B. Lippincott Co. 42s.

The Other Side of the Lantern. By Sir Frederick Treves, Bart., G.C.V.O., C.B., LL.D. London: Cassell and Co. 1906. 6s.

Mitteilungen aus der Augenklinik des Carolinischen Medico-Chirurgischen Instituts zu Stockholm. Von Dr. J. Widmark. Achtes Heft. Jena: Gustav Fischer. 1906. M.6.

Die heutige Lehre von den pathologisch-anatomischen Grundlagen der Herzschwäche. Von L. Aschoff und S. Tawara. Jena: Gustav Fischer. 1906. M.2.

Practical Prescribing and Dispensing for Medical Students. By William Kirkby. Second Edition. Manchester: University Press. 1906. 5s.

A Short Practice of Medicine. By Robert A. Fleming, M.A., M.D., F.R.C.P.E., F.R.S.E. London: J. and A. Churchill. 1906. 10s. 6d.

Arbeiten aus dem königlichen institut für experimentelle Therapie zu Frankfurt A.M. Herausgegeben von Geh. Med.-Rat. Professor Dr. P. Ehrlich. Heft II (Aus der Prüfungstechnischen Abteilung): R. Otto, Die staatliche Prufung der Heilsera. Mit 8 Figuren. Jena: Gustav Fischer. 1906. M. 3.00.

L'Ame et le Système Nerveux: Hygiène et Pathologie. Par Auguste Forel. Paris: G. Steinheil. 1906. Fr. 5.

Tuberculosis; its Origin and Extinction. By W. Pickett Turner, M.D. London: Adam and Charles Black. 1906. 2s. 6d.

Medical and Surgical Report of the Presbyterian Hospital in the City of New York. Vol. VI, January, 1904. Edited by Andrew J. McCosh, M.D., and W. Gilman Thompson, M.D. New York: Trow Directory Printing and Bookbinding Co.

Manual of Aseptic Surgery. By E. A. R. Newman, M.D., M.R.C.S.E., Major I.M.S. Calcutta: Thacker, Spink, and Co. 1906. 5s.

Anatomische, physiologische und physikalische Daten und Tabellen zum Gebrauche für Mediziner. Von Dr. Hermann. Vierordt. Dritte neu Bearbeitete Auflage. Jena: Gustav Fischer. 1906. M. 17.50.

Charlotte Corday in Prison. By George H. R. Dabbs, M.D. London: Charles William Deacon and Co. 1906. 2s. 6d.

Clinical Diagnosis. A Textbook of Clinical Microscopy and Clinical Chemistry for Medical Students, Laboratory Workers, and Practitioners of Medicine. By Charles Phillips Emerson, A.B., M.D. Philadelphia and London: J. B. Lippincott Co. 1906. 21s.

Expérimentation sur la Prophylaxie de la Syphilis. Par le Docteur Paul Maisonneuve. Paris: G. Steinheil. 1906. Fr. 2.50.

L'Auto-Intoxication Intestinale par le Dr. A. Combe. Paris: J. B. Baillière et Fils. 1907. Frs. 12.

Clinical Studies in the Treatment of the Nutritional Disorders of Infancy. By Ralph Vincent, M.D., M.R.C.P. London: Baillière, Tindall, and Cox. 1906. 3s. 6d.

Why Vaccinate? By H. W. Whiston. Second edition. Macclesfield: Claye, Brown, and Claye. 1906. 6d.

A Guide to Diseases of the Nose and Throat, and their Treatment. By C. A. Parker, F.R.C.S.Ed. London: E. Arnold. 1906. 18s.

Practical Methods of Inorganic Chemistry. By E. M. Perkin, Ph.D. London: A. Constable and Co., Limited. 1906. 2s. 6d.

The Birds of the British Islands. By C. Stonham, C.M.G., F.R.C.S., F.Z.S. Part II. London: E. Grant Richards. 1906. 7s. 6d.

Archives of the Middlesex Hospital. Volume VIII. London: Macmillan and Co., Limited. 1906.

Prostatectomie Périnéale et Prostatectomie Transvésicale, Méthode de Freyer, Etude comparée des deux Méthodes. Par A. Castaño. Buenos Aires: A. Etchepareborda. 1906.

*** In forwarding books the publishers are requested to state the selling price.

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
SEPTEMBER.	
23 Sunday.....	
24 MONDAY	
25 TUESDAY.....	LONDON: Metropolitan Counties Branch, Meeting of Council, in the Library, 429, Strand, at 5 p.m.
26 WEDNESDAY	LONDON: South-Eastern Branch Council, at 3.15 p.m.
27 THURSDAY...	DOVER DIVISION, *South-Eastern Branch*, Grand Hotel, Dover, 8.30 p.m. WANDSWORTH DIVISION, *Metropolitan Counties Branch*, Wandsworth Town Hall, 8.45 p.m.
28 FRIDAY.....	
29 SATURDAY...	
30 Sunday	
OCTOBER.	
1 MONDAY	
2 TUESDAY ...	LONDON: Public Health Committee, 3.15 p.m. SHROPSHIRE AND MID-WALES BRANCH, Salop Infirmary, Shrewsbury, 3 p.m.
3 WEDNESDAY	COVENTRY DIVISION. *Birmingham Branch*, Annual Dinner, Masonic Buildings, Little Park Street, Coventry, 7.30 p.m. (for 7.45). EDINBURGH: Scottish Committee, North British Station Hotel, 2.10 p.m.
4 THURSDAY...	CANTERBURY AND FAVERSHAM DIVISION, *South-Eastern Branch*, Dr. Hayward's House, Whitstable, 3 p.m.
5 FRIDAY	
6 SATURDAY...	
7 Sunday	
8 MONDAY	LONDON: Journal and Finance (Referendum) Committee, 2.30 p.m.
9 TUESDAY.....	LONDON: Organization Committee, 10.30 a.m. LONDON: Finance Inquiry Committee, 2.30 p.m.
OCTOBER *(continued)*.	
10 WEDNESDAY	LONDON: Medico-Political Committee, 2.30 p.m.
11 THURSDAY...	LONDON: Hospitals Committee, 2.30 p.m. LONDON: Premises and Library Committee, 3.15 p.m.
12 FRIDAY	LONDON: Central Ethical Committee, 2 p.m.
13 SATURDAY...	
14 Sunday	
15 MONDAY ...	
16 TUESDAY ...	
17 WEDNESDAY	LONDON: Journal and Finance Committee, 2 p.m.
18 THURSDAY...	
19 FRIDAY.....	
20 SATURDAY...	ABERDEEN BRANCH, Annual Meeting, Grand Hotel, Aberdeen, 1.15 p.m.
21 Sunday	
22 MONDAY	
23 TUESDAY.....	
24 WEDNESDAY	CENTRAL COUNCIL. DORSET AND WEST HANTS BRANCH, Sherborne.
25 THURSDAY...	WANDSWORTH DIVISION, *Metropolitan Counties Branch*, Battersea Town Hall, 8.45 p.m.
26 FRIDAY	
27 SATURDAY...	
28 Sunday	
29 MONDAY	
30 TUESDAY.....	
31 WEDNESDAY	
NOVEMBER.	
1 THURSDAY...	
2 FRIDAY.....	
3 SATURDAY...	

MEMBERSHIP OF THE BRITISH MEDICAL ASSOCIATION.

THE British Medical Association exists for the promotion of medical and the allied sciences, and the maintenance of the honour and the interests of the medical profession.

The Annual Subscription to the British Medical Association is £1 5s. 0d., and the BRITISH MEDICAL JOURNAL is supplied weekly, post free, to every member of the British Medical Association wherever he may reside.

Forms of application for membership can be obtained from the General Secretary, 429, Strand, London, W.C.

The principal rules governing the election of a medical practitioner to be a member of the British Medical Association are as follow:

Article III.—Any Medical Practitioner registered in the United Kingdom under the Medical Acts and any Medical Practitioner residing within the area of any Branch of the Association situate in any part of the British Empire other than the United Kingdom, who is so registered or possesses such medical qualifications as shall, subject to the Regulations, be prescribed by the Rules of the said Branch, shall be eligible as a Member of the Association. The mode and conditions of election to Membership shall from time to time be determined by or in accordance with the By-laws. Every Member, whether one of the existing Members or a subsequently-elected Member, shall remain a Member until he ceases to be a Member in accordance with the provisions hereof.

By-law 1.—Every Candidate for Membership of the Association shall apply for election in writing, addressed to the Association, and stating his agreement, if elected, to abide by the Regulations and By-laws of the Association, and the Rules of such Division and Branch to which he may at any time belong and to pay his subscription for the current year.

By-law 2.—Every candidate who resides within the area of a Branch shall forward his application to the Secretary of such Branch. Notice of the proposed election shall be sent by the Branch Secretary to the General Secretary of the Association, and to every Member of the Branch Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a member of the Association by the Branch Council at any meeting thereof held not less than seven days (or such longer period as the Branch may by its Rules prescribe) after the date of the said Notice. A Branch may by special Resolution require that each candidate for election to the Association shall furnish a certificate from two Members of the Association to whom he is personally known. Officers of the Navy, Army, and Indian Medical Services on the Active List are eligible for election through the Council or a Branch without approving signatures as laid down in By-law 3.

By-law 3.—Every candidate whose place of residence is not included in the area of any Branch shall forward his Application to the General Secretary of the Association, together with a statement, signed by three Members of the Association, that from personal knowledge they consider him a suitable person for election. Notice of the proposed election shall be sent by the General Secretary to every Member of the Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a Member of the Association by the Council at any meeting thereof held not less than one month after the date of the said notice.

The annual subscription to the BRITISH MEDICAL JOURNAL for non-members is £1 8s. 0d. for the United Kingdom and £1 12s. 6d. for abroad.

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